

Andrea Miranda-Mendizabal¹, Ingrid Vargas¹, Isabella Samico², Pamela Eguiguren³, Amparo-Susana Mogollón-Pérez⁴, Julieta López⁵, Fernando Bertolotto⁶, María-Luisa Vázquez¹ for Equity LA II.
 1 Consortium for Health Care and Social Services of Catalonia, Spain. 2 IMIP, Brazil. 3 U. of Chile. 4 Rosario University, Colombia. 5 Veracruzana University, Mexico. 6 U. of the Republic, Uruguay. Funding: (FP7/2007-2013), GA.305197.

BACKGROUND

The evaluation of effectiveness of interventions to improve clinical coordination is scarce in Latin America.

OBJECTIVE

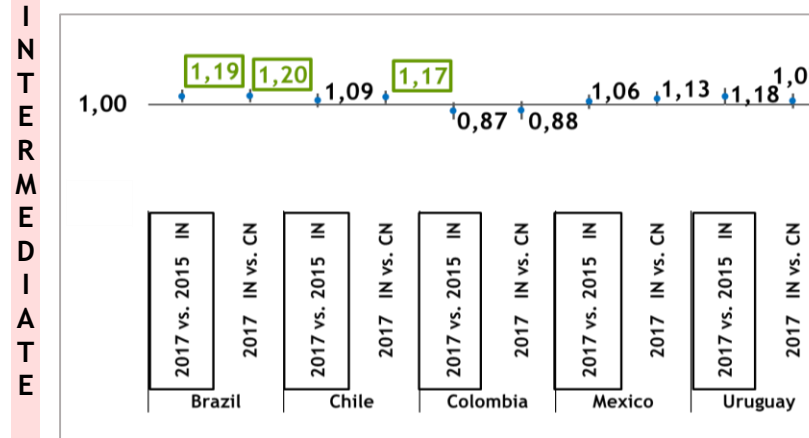
To evaluate the effectiveness of interventions implemented through participatory action research in improving clinical coordination between care levels in public healthcare networks of Brazil, Chile, Colombia, Mexico and Uruguay.

METHODS

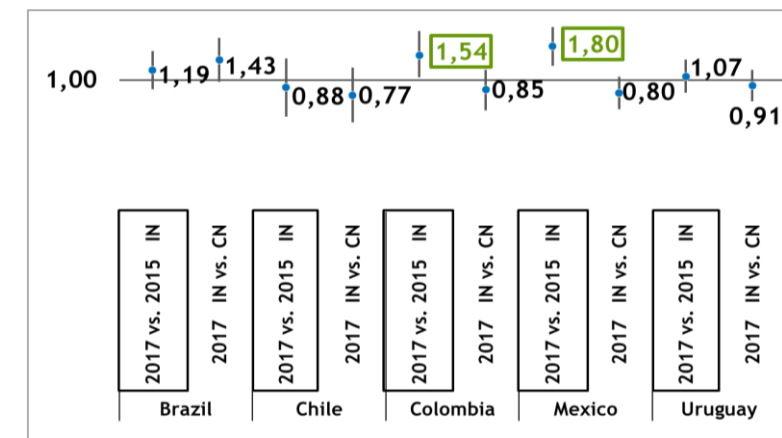
- Quasi-experimental study. Two networks in each country: Intervention (IN) and Control (CN).
- Baseline (2015) and evaluation (2017) based on surveys applying COORDENA® questionnaire.
- Study population: Primary (PC) and secondary (SC) care doctors (174 doctors/network/year).
- Interventions promoted clinical agreement and communication for patients' follow-up across care levels.
- Outcome variables: a) intermediate: interactional and organizational factors; b) final: experience of clinical management coordination (care consistency and patients' follow-up) and general perception of clinical coordination in the network.

RESULTS - Changes in the intermediate and final results

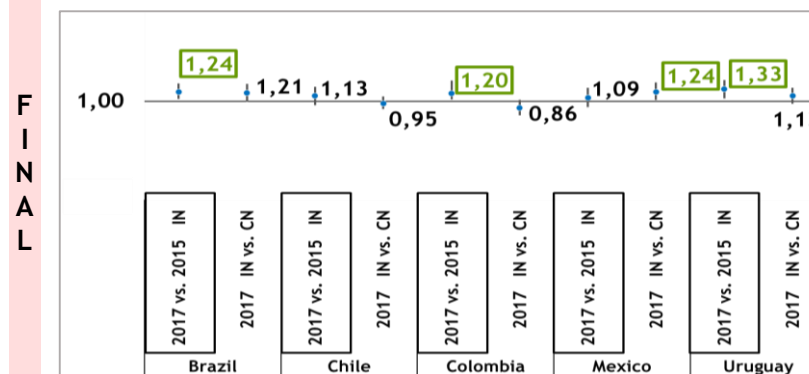
1. Identifies PC doctors as coordinator of patients' care*



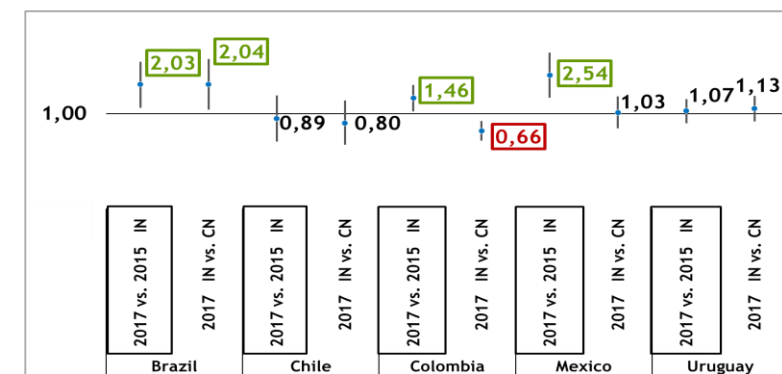
2. Managers' support to clinical coordination*



3. Agreement over the treatments across care levels*



4. General perception of clinical coordination*



IN: intervention network. CN: control network. * Prevalence ratios comparing 2017 vs. 2015 in the IN or comparing IN vs. CN in 2017.

CONCLUSIONS

- Improvements in intermediate and final results were observed in all INs.
- Reduced implementation time and some process and context factors may have limited their impact.